Image# 28991444344 07/15/2008 13:54

	RECEIPTS AND DISIED COMMITTEE OF A CANDI		OF PRESIDENT OR	1 / 6
1. NAME OF COMMITT				
Edwards For Presi	ident			
ADDRESS (number and	d street) X Check if different	han previously reported	_	
c/o 29 Briarwood Drive		indir previously reported	2. IDENTIFICATION N	UMBER
			C00384073	
CITY, STATE, and ZIP		00700	3. IS THIS REPORT FO	OR:
Ringgold	GA	30736	X Primary	General
4. TYPE OF RI	EPORT (Check here if this i	s a Termination Report.)		
April 15 Quarterly Re	eport	Monthly Report Due		П о
X July 15 Quarterly Re		February 20 March 20	∐ June 20 ∏ July 20	October 20 November 20
	'	April 20	August 20	December 20
October 15 Quarterly	/ Report	May 20	September 20	January 31
January 31 Year End	d Report	Twelfth day report p		
				Type of Election)
		election on	in ti	ne State of
		Thirtieth day report f	following the General Elec	tion on
		on		
IS THIS REPORT AN A	MENDMENT YES X	NO		
5. COVERING PERIOD		FROM 04/01/2008	THR	OUGH 06/30/2008
SUMMARY	6. CASH ON HAND AT BEGINNING REPORTING PERIOD	OF THE		1760.56
	7. TOTAL RECEIPTS THIS PERIOD (From Line 22, Column A, Page 2)			0.00
	8. SUBTOTAL (Lines 6 and 7)			1760.56
	9. TOTAL DISBURSEMENTS THIS (From Line 30, Column A, Page 2)			0.00
	10. CASH ON HAND AT CLOSE OF (Subtract Line 9 from 8)	REPORTING PERIOD		1760.56
	11. DEBTS AND OBLIGATIONS OW (Itemize All on Schedule C-P or Sc			0.00
	12. DEBTS AND OBLIGATIONS OW (Itemize All on Schedule C-P or S			333586.46
	13. EXPENDITURES SUBJECT TO	LIMITATION		0.00
NET ELECTION CYCLE- TO-DATE	14. NET CONTRIBUTIONS (Other the (Subtract Line 28d, Column B from	nan Loans) n 17e, Column B, Page 2)		21659403.90
EXPENDITURES	15. NET OPERATING EXPENDITUI (Subtract Line 20a, Colummn B fro			19527796.76
I certify that I have exa	mined this Report and to the best of	my knowledge and belief it is t	true, correct, and comple	ete.
Type or Print Name of Tr Julius Chambe				Date 07/15/2008
Signature of Treasurer				
NOTE: Submission of fa	lse, erroneous, or incomplete informatio	n may subject the person signing	this Report to the penaltie	s of 2 U.S.C. &437a.
	EC FORM 3P are obsolete and should			
For further information	contact: Federal Election Com 999 E Street, N.W.	Toll Free 800-424	1-9530	FEC FORM 3P (01/2001)

Local 202-694-1100

Washington, DC 20463

(PAGE 2, FEC FORM 3P) Name of committee (in full) Edwards For President		Report Covering the Period From: 04/01/2008	d To: 06/30/2008
		COLUMN A	COLUMN B
I. RECEIPTS		Total This Period	Election Cycle-to-Date
16. FEDERAL FUNDS (Itemize on Schedule A-P)		0.00	6706458.44
17. CONTRIBUTIONS (other than loans) FROM:			
(a) Individuals/Persons Other Than Political Committees		0.00	21896886.23
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	2000.00
(d) The Candidate		0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (Add 17(a), 17(b), 17((c), 17(d))	0.00	21898886.23
18. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES		0.00	962908.26
19. LOANS RECEIVED:			
(a) Loans Received From or Guaranteed by Candidate		0.00	0.00
(b) Other Loans		0.00	2470613.53
(c) TOTAL LOANS (Add 19(a) and 19(b))		0.00	2470613.53
20. OFFSETS TO EXPENDITURES (Refunds, Rebates, etc.) :			
(a) Operating		0.00	1715161.47
(b) Fundraising		0.00	0.00
(c) Legal and Accounting		0.00	0.00
(d) TOTAL OFFSETS TO OPERATING EXPENDITURES (Add 20(a),	20(b) and 20(c))	0.00	1715161.47
21. OTHER RECEIPTS (Dividend, Interest, etc.)		0.00	0.00
22. TOTAL RECEIPTS (Add 16, 17(e), 18, 19(c), 20(d), 21)		0.00	33754027.93
II. DISBURSEMENTS			
23. OPERATING EXPENDITURES		0.00	21242958.23
24. TRANSFERS TO OTHER AUTHORIZED COMMITTEES		0.00	0.00
25. FUNDRAISING DISBURSEMENTS		0.00	6947671.17
26. EXEMPT LEGAL AND ACCOUNTING DISBURSEMENTS		0.00	2847441.10
27. LOAN REPAYMENTS MADE :			
(a) Repayment of Loans made or Guaranteed by Candidate		0.00	0.00
(b) Other Repayments		0.00	2470613.53
(c) TOTAL LOAN REPAYMENTS MADE (Add 27(a) and 27(b))		0.00	2470613.53
28. REFUNDS OF CONTRIBUTIONS TO :			
(a) Individuals/Persons Other Than Political Committees		0.00	239482.33
(b) Political Party Committees		0.00	0.00
(c) Other Political Committees		0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (Add 28(a), 28(b), 28(c))		0.00	239482.33
29. OTHER DISBURSEMENTS		0.00	0.00
30. TOTAL DISBURSEMENTS (Add 23, 24, 25, 26, 27(c), 28(d) and 29)		0.00	33748166.36
III. CONTRIBUTED ITEMS (Stock, Art C	biects. etc.)		
• • •		2.22	
31. ITEMS ON HAND TO BE LIQUIDATED (Attach List)		0.00	

Ringgold

GΑ

age# 2000 1444040		
ALLOCATION OF PRIMARY EXPENDITURES BY STATE FOR A P (Used Only by Primary Committees Receiving or Expecting to Receive F (PAGE 3, FEC FORM 3P)		3 / 6
1. NAME OF COMMITTEE (in full)		
Edwards For President		
ADDRESS (number and street)		
c/o 29 Briarwood Drive		
CITY STATE and ZID CODE	2 IDENTIFICATION NUMBER	

C00384073

ALLOCATION BY STATE

30736

STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE	STATE	ALLOCATION THIS PERIOD	TOTAL ALLOCATION TO DATE
Alabama	0.00	1591.61	Nebraska	0.00	16352.60
Alaska	0.00	0.00	Nevada	0.00	8.46
Arizona	0.00	5384.54	New Hampshire	0.00	502847.28
Arkansas	0.00	1132.59	New Jersey	0.00	5019.61
California	0.00	51645.61	New Mexico	0.00	61502.48
Colorado	0.00	530.76	New York	0.00	183347.97
Connecticut	0.00	3670.57	North Carolina	0.00	120103.37
Delaware	0.00	5.15	North Dakota	0.00	121.95
District of Columbia	0.00	16701.42	Ohio	0.00	379598.46
Florida	0.00	3318.84	Oklahoma	0.00	330503.12
Georgia	0.00	384569.94	Oregon	0.00	3065.19
Hawaii	0.00	675.00	Pennsylvania	0.00	8718.71
Idaho	0.00	11.98	Rhode Island	0.00	0.00
Illinois	0.00	34916.29	South Carolina	0.00	900211.49
Indiana	0.00	1099.48	South Dakota	0.00	2244.92
Iowa	0.00	1313622.01	Tennessee	0.00	207805.97
Kansas	0.00	5097.60	Texas	0.00	30659.11
Kentucky	0.00	462.87	Utah	0.00	1125.00
Louisiana	0.00	1028.94	Vermont	0.00	41993.79
Maine	0.00	31639.98	Virginia	0.00	177643.60
Maryland	0.00	7941.40	Washington	0.00	2415.13
Massachussetts	0.00	509679.72	West Virginia	0.00	1130.15
Michigan	0.00	8061.49	Wisconsin	0.00	173050.83
Minnesota	0.00	100268.44	Wyoming	0.00	2.33
Mississippi	0.00	10.96	Puerto Rico	0.00	0.00
Missouri	0.00	107061.09	Guam	0.00	0.00
Montana	0.00	0.00	Virgin Islands	0.00	0.00
			TOTALS	0.00	5739599.83

PAGE 4/6 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) **Edwards For President** Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Limbic Systems Computer Services Mailing Address 3124 19th Street North ZIP Code City State Arlington VA 22201 Outstanding Balance Beginning This Period Transaction ID: SD-4255 8208.87 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 8208.87 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): H. Charles Kaffie Mailing Address P.O. Box 2967 ZIP Code City State Corpus Christi 78403 TX Outstanding Balance Beginning This Period Transaction ID: SD-4256 2000.00 Amount Incurred This Period Outstanding Balance at Close of This Period Payment This Period 0.00 0.00 2000.00 Nature of Debt (Purpose): C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Axelrod & Associates Consulting/Media Mailing Address 730 North Franklin Street Suite 404 ZIP Code City State Chicago IL 60610 Outstanding Balance Beginning This Period Transaction ID: SD-4257 64593.75 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 64593.75 74802.62 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

PAGE 5/6 Schedule D-P (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 11 numbered line) **Excluding Loans** X 12 NAME OF COMMITTEE (In Full) **Edwards For President** Nature of Debt (Purpose): A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Rowen/Warren Inc. Consulting/ Communications Mailing Address 217 Highland Avenue ZIP Code City State Sleepy Hollow NY 10591 Outstanding Balance Beginning This Period Transaction ID: SD-4258 6400.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 6400.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Consulting/Media James Andrews and Company Mailing Address 105H West Delaware Place ZIP Code State City 60610 Chicago IL Outstanding Balance Beginning This Period Transaction ID: SD-4259 26469.93 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 0.00 26469.93 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Ryan Phillips Utrecht & McKinnon Consulting/Legal Mailing Address 1133 Connecticut Avenue, NW Suite 300 ZIP Code City State Washington DC 20036 Outstanding Balance Beginning This Period Transaction ID: SD-4260 225913.91 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 0.00 225913.91 258783.84 1) SUBTOTALS This Period This Page (optional)..... 333586.46 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... 333586.46 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

Schedule B-P

FOR LINE NUMBER: PAGE 6/6 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the Detailed Summary Page 23 25 27a 27b 28a 28b 29 Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Edwards For President Full Name (Last, First, Middle Initial) Transaction ID: SB23UNITEMIZED-1 A. Unitemized Line 23 Expenditures Date of Disbursement 0 6 3 0 2008 Mailing Address City State Zip Code Amount of Each Disbursement this Period 0.00 Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: General Senate Primary President Other (specify) State: District:

SUBTOTAL of Disbursements This Page (optional)	•	0.00
TOTAL This Period (last page this line number only)	•	0.00

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